

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	C		6-18
O.I.P.E. CLASSIFIER		831	08/04/09
FORMALITY REVIEW	ALW	831	12/07/00
RESPONSE FORMALITY REVIEW	DF	831	

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
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Claim	Date
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Original	
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Claim	Date
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If more than 150 claims or 10 actions
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